

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

THE CONSERVATIVE STRIKEFORCE

ADDRESS (number and street)

2776 S ARLINGTON MILL DRIVE

# 806

☐ Check if different than previously reported. (ACC)

ARLINGTON

VA

22206

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00457291

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

01

01

2014

03

31

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer SCOTT B MACKENZIE

Signature of Treasurer

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

04

14

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

THE CONSERVATIVE STRIKEFORCE

Report Covering the Period: From: M M / D D / Y Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y Y 03 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2014		63446.34
(b) Cash on Hand at Beginning of Reporting Period.....	63446.34	
(c) Total Receipts (from Line 19) .....	469105.33	469105.33
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	532551.67	532551.67
7. Total Disbursements (from Line 31) .....	473918.77	473918.77
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	58632.90	58632.90
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	193167.17	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**THE CONSERVATIVE STRIKEFORCE**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
01	/	01	/	2014

To:

M M	/	D D	/	Y Y Y Y
03	/	31	/	2014

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

80370.00

80370.00

(ii) Unitemized .....

384882.02

384882.02

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

465252.02

465252.02

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

465252.02

465252.02

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

700.00

700.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

1.00

1.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

3152.31

3152.31

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ►

469105.33

469105.33

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

469105.33

469105.33

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	468218.77	468218.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	468218.77	468218.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	700.00	700.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	473918.77	473918.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	473918.77	473918.77

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	465252.02	465252.02
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	465252.02	465252.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	468218.77	468218.77
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	468218.77	468218.77

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. ROBERT ANDERSEN 282**

Mailing Address 201 PERRIN PL

City  
CHARLOTTE

State Zip Code  
NC 28207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2014

Transaction ID : SA11AI.77655

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. CHARLES ANDREWS 497**

Mailing Address PO BOX 40

City  
ELLSWORTH

State Zip Code  
MI 49729

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 08 / 2014

Transaction ID : SA11AI.78867

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. MRS MYRA ASPLUNDH 190**

Mailing Address PO BOX 11

City  
BRYN ATHYN

State Zip Code  
PA 19009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 06 / 2014

Transaction ID : SA11AI.75302

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 145

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. RICHARD BALLANTYNE 329

Mailing Address 523 ISLAND CT

City	State	Zip Code
IHB	FL	32937

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	0		2	0	1	4

Transaction ID : SA11AI.78932

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. MICHAEL BARKER 300

Mailing Address 305 HELENS MANOR DR

City	State	Zip Code
LAWRENCEVILLE	GA	30045

FEC ID number of contributing federal political committee.

C

Name of Employer

CHEATHAM COUNTY SCHOOLS

Occupation

EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	1	4

Transaction ID : SA11AI.69855

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. MRS NANCY L BARNHART 380

Mailing Address 7370 WALSH RD

City	State	Zip Code
MILLINGTON	TN	38053

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	1	4

Transaction ID : SA11AI.68593

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

900.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MRS NANCY L BARNHART 380**

Mailing Address 7370 WALSH RD

City

MILLINGTON

State

TN

Zip Code

38053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2014

Transaction ID : SA11AI.68594

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MR RAY R BARRETT 797 JR**

Mailing Address HC 34 BOX 3

City

MIDKIFF

State

TX

Zip Code

79755

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER & RANCHER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2014

Transaction ID : SA11AI.75331

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. GAY BAUKOL 852**

Mailing Address 9290 E THOMPSON PEAK PKWY #250

City

SCOTTSDALE

State

AZ

Zip Code

85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 15 / 2014

Transaction ID : SA11AI.78976

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1400.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. DONALD BEATY 338**

Mailing Address PO BOX 1259

City

LAKE WALES

State

FL

Zip Code

33859

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PETE BEATY RANCH LLC

Occupation

MANAGING PARTNER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2014

Transaction ID : SA11AI.64622

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. MR DAVID WAYNE BELL 750**

Mailing Address 1909 DEBORAH DR

City

SHERMAN

State

TX

Zip Code

75090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CLINICAL PSYCHOLOGY

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2014

Transaction ID : SA11AI.68607

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. FRED BIALEK 940**

Mailing Address 200 WINDING WAY

City

WOODSIDE

State

CA

Zip Code

94062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 09 / 2014

Transaction ID : SA11AI.79029

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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PAGE 10 OF 145

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MS WINIFRED BLINN 334**

Mailing Address 1751 WOOD FERN DR

City State Zip Code  
BOYNTON BEACH FL 33436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 17 / 2014

**Transaction ID : SA11AI.68636**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. MR JOSEPH BOLAND 303**

Mailing Address 2525 POTOMAC AVE NE

City State Zip Code  
ATLANTA GA 30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 14 / 2014

**Transaction ID : SA11AI.64718**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. MR TED BOWMAN 344**

Mailing Address 2440 NE 7TH ST

City State Zip Code  
OCALA FL 34470

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TED BOWMAN INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2014

**Transaction ID : SA11AI.68648**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

950.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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PAGE 11 OF 145

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR HARRY A BRANDT 321**

Mailing Address 4711 VAN KLEECK DR

City State Zip Code  
 NEW SMYRNA BEACH FL 32169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 03 / 2014

**Transaction ID : SA11AI.75458**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. ANNE BRINKERHOFF 220**

Mailing Address 5411 POINT LONGSTREET WAY

City State Zip Code  
 BURKE VA 22015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 13 / 2014

**Transaction ID : SA11AI.79148**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. MISS WANDA C BRINKLEY 773**

Mailing Address 9505 NORTHPOINTE BLVD APT 9310A

City State Zip Code  
 SPRING TX 77379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

02 / 24 / 2014

**Transaction ID : SA11AI.64788**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. PATRICIA W BRYAN 058**

Mailing Address 324 WISHING WELL AVE

City  
NEWPORT

State Zip Code  
VT 05855

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

BED & BREAKFAST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2014

Transaction ID : SA11AI.70204

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. MS ELIZABETH BRYDEN 100**

Mailing Address 1 W 67TH ST APT 611

City  
NEW YORK

State Zip Code  
NY 10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

DANCER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 17 / 2014

Transaction ID : SA11AI.64842

Amount of Each Receipt this Period

705.00

Full Name (Last, First, Middle Initial)

**C. DR ENRIQUE BURSZTYN 475 MD**

Mailing Address 1213 BURNETT LN

City  
VINCENNES

State Zip Code  
IN 47591

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOOD SAMARITAN HOSPITAL

Occupation

NEURORADIOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2014

Transaction ID : SA11AI.68676

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1205.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR CHUCK CAMP 442**

Mailing Address 3450 LAWNDALDE DR

City  
KENT

State  
OH

Zip Code  
44240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WINDSTREAM

Occupation

SWITCH TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 04 / 2014

Transaction ID : SA11AI.70297

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MS SUE M CANNON 802**

Mailing Address 6420 W LAKERIDGE RD

City

LAKEWOOD

State

CO

Zip Code

80227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
01 / 17 / 2014

Transaction ID : SA11AI.64919

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. JONI CARPENTER 760**

Mailing Address 1507 PEBBLE BAY CT

City

GRANBURY

State

TX

Zip Code

76048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2014

Transaction ID : SA11AI.79253

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MS DONNA CARRICO 902**

Mailing Address 221 AVENUE D

City State Zip Code  
 REDONDO BEACH CA 90277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MATH TECH

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 01 / 2014

Transaction ID : SA11AI.77823

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. MR JOSEPH CARTY 020**

Mailing Address 235 RIVER ST

City State Zip Code  
 NORWELL MA 02061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

03 / 17 / 2014

Transaction ID : SA11AI.68697

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. DICEY S CHILDERS 350**

Mailing Address 8517 JOY RD

City State Zip Code  
 BLOUNTSVILLE AL 35031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE ALABASTER BOX

Occupation

CHRISTIAN BOOKSTORE OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

03 / 31 / 2014

Transaction ID : SA11AI.68709

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

425.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MS DORIS M CHURCH 346**

Mailing Address 1973 DUNLOE CIR

City State Zip Code  
DUNEDIN FL 34698

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 20 / 2014

Transaction ID : SA11AI.75611

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. MR EDWARD CLARK 600**

Mailing Address 138 EDDY LN

City State Zip Code  
NORTHFIELD IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 31 / 2014

Transaction ID : SA11AI.65015

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MRS ELLOINE M CLARK 752**

Mailing Address 3716 MAPLEWOOD AVE

City State Zip Code  
DALLAS TX 75205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 31 / 2014

Transaction ID : SA11AI.75625

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. MRS ELLOINE M CLARK 752

Mailing Address 3716 MAPLEWOOD AVE

City State Zip Code  
DALLAS TX 75205

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2014

Transaction ID : SA11AI.75631

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. MRS ELLOINE M CLARK 752

Mailing Address 3716 MAPLEWOOD AVE

City State Zip Code  
DALLAS TX 75205

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 25 / 2014

Transaction ID : SA11AI.75626

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

C. JUDITH SOMERSET CLARK 902

Mailing Address 19781 GRAND VIEW DR

City State Zip Code  
TOPANGA CA 90290

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2014

Transaction ID : SA11AI.68715

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

4750.00

TOTAL This Period (last page this line number only)..... ►



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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MRS ELEANOR COBB 900**

Mailing Address 131 S VISTA ST

City

LOS ANGELES

State

CA

Zip Code

90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 13 / 2014

Transaction ID : SA11AI.65036

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. MS MARY CONAWAY 352**

Mailing Address 306 EASTON CIR

City

BIRMINGHAM

State

AL

Zip Code

35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 06 / 2014

Transaction ID : SA11AI.65064

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. MR JAMES COOLEY 283**

Mailing Address 5 CHATHAM LN

City

PINEHURST

State

NC

Zip Code

28374

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

01 / 31 / 2014

Transaction ID : SA11AI.65083

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR JAMES COOLEY 283**

Mailing Address 5 CHATHAM LN

City  
PINEHURST

State Zip Code  
NC 28374

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 19 / 2014

Transaction ID : SA11AI.65082

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. GARY COUGHLAN 341**

Mailing Address 1100 5TH AVE S , STE 201

City  
NAPLES

State Zip Code  
FL 34102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2014

Transaction ID : SA11AI.79370

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. GARY CROCKER 666**

Mailing Address 43 SW PEPPER TREE LN

City  
TOPEKA

State Zip Code  
KS 66611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2014

Transaction ID : SA11AI.68740

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. JAMES DAVISON 902**

Mailing Address 412 N PALM DR APT #105

City State Zip Code  
BEVERLY HILLS CA 90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2014

Transaction ID : SA11AI.70652

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**B. MRS BARBARA DE SAUSSURE 945**

Mailing Address 3842 BROOKDALE BLVD

City State Zip Code  
CASTRO VALLEY CA 94546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 06 / 2014

Transaction ID : SA11AI.75749

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. WAYNE DEWITT 986**

Mailing Address 10816 SE EVERGREEN HWY

City State Zip Code  
VANCOUVER WA 98664

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2014

Transaction ID : SA11AI.79483

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

795.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. JOYCE DILL 452

Mailing Address 3725 WEST CENTER ST

City State Zip Code  
 CINCINNATI OH 45227

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 01 / 20 / 2014

Transaction ID : SA11AI.79508

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. JOYCE DILL 452

Mailing Address 3725 WEST CENTER ST

City State Zip Code  
 CINCINNATI OH 45227

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 01 / 22 / 2014

Transaction ID : SA11AI.79502

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. JOYCE DILL 452

Mailing Address 3725 WEST CENTER ST

City State Zip Code  
 CINCINNATI OH 45227

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 01 / 23 / 2014

Transaction ID : SA11AI.79504

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

300.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. JOYCE DILL 452**

Mailing Address 3725 WEST CENTER ST

City State Zip Code  
CINCINNATI OH 45227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 30 / 2014

Transaction ID : SA11AI.79505

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JOYCE DILL 452**

Mailing Address 3725 WEST CENTER ST

City State Zip Code  
CINCINNATI OH 45227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2014

Transaction ID : SA11AI.79509

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. JOYCE DILL 452**

Mailing Address 3725 WEST CENTER ST

City State Zip Code  
CINCINNATI OH 45227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2014

Transaction ID : SA11AI.79507

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. ALLEN DINES 334**

Mailing Address 15 ISLE RDG E

City

HOBE SOUND

State

FL

Zip Code

33455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2014

Transaction ID : SA11Al.68782

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**B. DRUSCILLA DOEHRMAN 341**

Mailing Address PO BOX 2165

City

NAPLES

State

FL

Zip Code

34106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2014

Transaction ID : SA11Al.79519

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. DRUSCILLA DOEHRMAN 341**

Mailing Address PO BOX 2165

City

NAPLES

State

FL

Zip Code

34106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2014

Transaction ID : SA11Al.79521

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. JERRY DOHERTY 515

Mailing Address 21 SUSAN LN

City State Zip Code  
 COUNCIL BLUFFS IA 51503

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 / 06 / 2014

Transaction ID : SA11AI.70760

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. MR PAUL H DUDLEY 977 JR

Mailing Address 60230 TEKAMPE RD

City State Zip Code  
 BEND OR 97702

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 14 / 2014

Transaction ID : SA11AI.68799

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. MRS COLLEEN DUKE 795

Mailing Address 2008 COUNTY ROAD 137

City State Zip Code  
 SNYDER TX 79549

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 29 / 2014

Transaction ID : SA11AI.74501

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

650.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. CHARLOTTE DUNLOP 953**

Mailing Address 5055 BLUEGUM AVE

City State Zip Code  
 MODESTO CA 95358

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 05 2014

Transaction ID : SA11AI.70823

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. MRS SYLVIA DURYEE 981**

Mailing Address 1115 41ST AVE E

City State Zip Code  
 SEATTLE WA 98112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 10 2014

Transaction ID : SA11AI.68805

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. MR O J EARLY 920**

Mailing Address 152 CAMINO DEL POSTIGO

City State Zip Code  
 ESCONDIDO CA 92029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 18 2014

Transaction ID : SA11AI.65391

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR O J EARLY 920**

Mailing Address 152 CAMINO DEL POSTIGO

City State Zip Code  
 ESCONDIDO CA 92029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.68808**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MR WILLIAM EASLEY 924**

Mailing Address 3184 PARKSIDE DR

City State Zip Code  
 SAN BERNARDINO CA 92404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOFORTH & MARTI BUSINESS INTERIORS

Occupation

EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : SA11AI.65395**

Amount of Each Receipt this Period

299.00

Full Name (Last, First, Middle Initial)

**C. JIM ENGEL 933**

Mailing Address 7512 PEMBROKE AVE

City State Zip Code  
 BAKERSFIELD CA 93308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : SA11AI.79640**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

424.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

## **A. DUANE EPTON 995**

Mailing Address 3705 ARTIC #452

City State Zip Code  
 ANCHORAGE AK 99503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 01 / 31 / 2014

Transaction ID : SA11AI.70892

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. MRS MARILYN FAULKNER 765**

Mailing Address 1141 WESTERN HILLS RD

City State Zip Code  
 ROCKDALE TX 76567

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 / 10 / 2014

Transaction ID : SA11AI.65521

Amount of Each Receipt this Period

450.00

Full Name (Last, First, Middle Initial)

## **C. RUSSELL FILER 923**

Mailing Address 13057 CALIFORNIA ST

City State Zip Code  
 YUCAIPA CA 92399

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 / 18 / 2014

Transaction ID : SA11AI.65547

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. MR RAYMOND FINK 488

Mailing Address PO BOX 134

City

WILLIAMSTON

State

MI

Zip Code

48895

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	4

Transaction ID : SA11AI.77968

Amount of Each Receipt this Period

205.00

Full Name (Last, First, Middle Initial)

B. MR RAYMOND FINK 488

Mailing Address PO BOX 134

City

WILLIAMSTON

State

MI

Zip Code

48895

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	1	4

Transaction ID : SA11AI.74544

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. MR ROBERT D FISHER 327

Mailing Address 727 S FLORIDA AVE

City

DELAND

State

FL

Zip Code

32720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	1	4

Transaction ID : SA11AI.65556

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1305.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. REBECCA FOURNIER 773**

Mailing Address 29 E ROYAL MEWS

City State Zip Code  
 CONROE TX 77384

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNEMPLOYED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2014

Transaction ID : SA11AI.79772

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. MR RICHARD GABLE 208**

Mailing Address 4515 WILLARD AVE  
 UNIT S2318

City State Zip Code  
 CHEVY CHASE MD 20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRIDENT SYSTEMS

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2014

Transaction ID : SA11AI.71086

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MR RICHARD GABLE 208**

Mailing Address 4515 WILLARD AVE  
 UNIT S2318

City State Zip Code  
 CHEVY CHASE MD 20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRIDENT SYSTEMS

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2014

Transaction ID : SA11AI.78004

Amount of Each Receipt this Period

80.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

430.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR RICHARD GABLE 208**

Mailing Address 4515 WILLARD AVE  
UNIT S2318

City State Zip Code  
CHEVY CHASE MD 20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRIDENT SYSTEMS

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 25 / 2014

Transaction ID : SA11AI.74564

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MR WARREN GALKIN 028**

Mailing Address 29 SAGE DR

City State Zip Code  
WARWICK RI 02886

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NATCO PRODUCTS CORP

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 21 / 2014

Transaction ID : SA11AI.65683

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. JOAN GARDNER 330**

Mailing Address 20 DOLPHIN LN

City State Zip Code  
KEY LARGO FL 33037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 14 / 2014

Transaction ID : SA11AI.71109

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. DOUG GEHRIG 706**

Mailing Address 3414 COMMON ST

City

LAKE CHARLES

State

LA

Zip Code

70607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCDONALD'S

Occupation

FRANCHISE OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 25 / 2014

Transaction ID : SA11AI.71134

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. MS SONJA GERQUEST 064**

Mailing Address 5101 ASHLAR VLG

City

WALLINGFORD

State

CT

Zip Code

06492

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

02 / 24 / 2014

Transaction ID : SA11AI.75976

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. BETTY GIEBEL 347**

Mailing Address 1586 COMPASS CT

City

KISSIMMEE

State

FL

Zip Code

34744

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

03 / 04 / 2014

Transaction ID : SA11AI.79860

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. BETTY GIEBEL 347**

Mailing Address 1586 COMPASS CT

City

KISSIMMEE

State

FL

Zip Code

34744

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2020.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2014

Transaction ID : SA11AI.79859

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. MR JAMES GORMAN 449**

Mailing Address PO BOX 2599

City

MANSFIELD

State

OH

Zip Code

44906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GORMAN RUPP CO

Occupation

CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 06 / 2014

Transaction ID : SA11AI.65775

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MR WILLIAM GRAY 605 III**

Mailing Address 124 DRAGONFLY

City

BURR RIDGE

State

IL

Zip Code

60527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WILLIAM GRAY & SONS CO

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 22 / 2014

Transaction ID : SA11AI.65792

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

920.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR RICHARD S GRIFFITH 705**

Mailing Address PO BOX 91610

City

LAFAYETTE

State

LA

Zip Code

70509

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2014

Transaction ID : SA11AI.65812

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. MR JAMES A HALLS 850**

Mailing Address 4555 E MAYO BLVD UNIT 4301

City

PHOENIX

State

AZ

Zip Code

85050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 23 / 2014

Transaction ID : SA11AI.65863

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. MR KERN HAMILTON 950**

Mailing Address 800 BLOSSOM HILL RD UNIT E324

City

LOS GATOS

State

CA

Zip Code

95032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11AI.68927

Amount of Each Receipt this Period

800.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2400.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 145

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR JOHN A HARPER 630**

Mailing Address 1030 CY ANN DR

City State Zip Code  
TOWN COUNTRY MO 63017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 20 / 2014

Transaction ID : SA11AI.76107

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. DR HOWARD HARPER 735 MD**

Mailing Address 8 DESERT RD DR

City State Zip Code  
LAWTON OK 73505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SELF EMPLOYED

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2014

Transaction ID : SA11AI.71342

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. TATNALL HILLMAN 816**

Mailing Address 504 W BLEEKER ST

City State Zip Code  
ASPEN CO 81611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 07 / 2014

Transaction ID : SA11AI.80111

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. TATNALL HILLMAN 816**

Mailing Address 504 W BLEEKER ST

City  
ASPEN

State Zip Code  
CO 81611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA11AI.80109

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. TATNALL HILLMAN 816**

Mailing Address 504 W BLEEKER ST

City  
ASPEN

State Zip Code  
CO 81611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 08 / 2014

Transaction ID : SA11AI.80110

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. TATNALL HILLMAN 816**

Mailing Address 504 W BLEEKER ST

City  
ASPEN

State Zip Code  
CO 81611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : SA11AI.80112

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. TATNALL HILLMAN 816**

Mailing Address 504 W BLEEKER ST

City  
ASPEN

State Zip Code  
CO 81611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2014

Transaction ID : SA11AI.80113

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. MR DONALD HINES 857**

Mailing Address 8172 E GALINDA DR

City  
TUCSON

State Zip Code  
AZ 85750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2014

Transaction ID : SA11AI.74680

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. MR MICHAEL J HOLASEK 531**

Mailing Address 3747 E VAN NORMAN AVE

City  
CUDAHY

State Zip Code  
WI 53110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 06 / 2014

Transaction ID : SA11AI.76176

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR MICHAEL J HOLASEK 531**

Mailing Address 3747 E VAN NORMAN AVE

City  
CUDAHY

State Zip Code  
WI 53110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 13 / 2014

Transaction ID : SA11AI.76177

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MS MARIE HOYER 770**

Mailing Address 4741 KINGLET ST

City  
HOUSTON

State Zip Code  
TX 77035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2014

Transaction ID : SA11AI.71577

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. MRS JEAN HYDE 980**

Mailing Address 4428 136TH PL SE

City  
BELLEVUE

State Zip Code  
WA 98006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2014

Transaction ID : SA11AI.66096

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MRS JEAN HYDE 980**

Mailing Address 4428 136TH PL SE

City	State	Zip Code
BELLEVUE	WA	98006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	24	/	2014

Transaction ID : SA11AI.68990

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MS PATRICIA JACOBSEN 956**

Mailing Address 7940 AMALFI WAY

City	State	Zip Code
FAIR OAKS	CA	95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	25	/	2014

Transaction ID : SA11AI.74709

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. MR LOREN JAHN 604**

Mailing Address 13149 N COUNTRY CLUB CT

City	State	Zip Code
PALOS HEIGHTS	IL	60463

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOREN JAHN PRIVATE CHARITABLE FOUND

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	13	/	2014

Transaction ID : SA11AI.68999

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. RUSSELL L JOHNSON 921**

Mailing Address 1810 AVENIDA DEL MUNDO #503

City State Zip Code  
 CORONADO CA 92118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 27 / 2014

Transaction ID : SA11AI.80255

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. ROBERT JONES 958**

Mailing Address 3715 LYNWOOD WAY

City State Zip Code  
 SACRAMENTO CA 95864

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 29 / 2014

Transaction ID : SA11AI.80277

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MELVIN KAFTAN 480**

Mailing Address 29100 NORTHWESTERN HWY STE 260

City State Zip Code  
 SOUTHFIELD MI 48034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KAFTAN ENTERPRISES

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 08 / 2014

Transaction ID : SA11AI.80292

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. JULIE KELLAM 452**

Mailing Address 8437 OWLWOODS LN

City State Zip Code  
 CINCINNATI OH 45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 27 / 2014

Transaction ID : SA11AI.74745

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MISS LINDA KENDALL 330**

Mailing Address 50 CLUB HOUSE RD

City State Zip Code  
 KEY LARGO FL 33037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 / 07 / 2014

Transaction ID : SA11AI.66271

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. MRS LINDA KENDALL 941**

Mailing Address 2151 LAGUNA ST

City State Zip Code  
 SAN FRANCISCO CA 94115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 / 24 / 2014

Transaction ID : SA11AI.76371

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR JAMES S KERNAN 134 JR**

Mailing Address 275 CLINTON ST

City

WHITESBORO

State

NY

Zip Code

13492

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.69038

Amount of Each Receipt this Period

226.00

Full Name (Last, First, Middle Initial)

**B. MRS JUNE M KESSLER 337**

Mailing Address 7978 GARDEN DR N

City

SAINT PETERSBURG

State

FL

Zip Code

33710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2014

Transaction ID : SA11AI.69041

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. MS JUNE MATHIS KESSLER 337**

Mailing Address 7978 GARDEN DR N

City

ST PETERSBURG

State

FL

Zip Code

33710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2014

Transaction ID : SA11AI.76383

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

976.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR RAYMOND KINCAID 661**

Mailing Address 3850 N 55TH ST

City  
KANSAS CITY

State Zip Code  
KS 66104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2014

Transaction ID : SA11AI.66301

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. MR LEONARD M KIRK 210**

Mailing Address 6 HUNTER DR

City  
BEL AIR

State Zip Code  
MD 21014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 06 / 2014

Transaction ID : SA11AI.69048

Amount of Each Receipt this Period

625.00

Full Name (Last, First, Middle Initial)

**C. MR ROBERT C KISER 597**

Mailing Address 34 SUGAR BEET ROW

City  
WHITEHALL

State Zip Code  
MT 59759

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2014

Transaction ID : SA11AI.66313

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. LOUISE KNOELL 357**

Mailing Address 113 LAUREL BEND DR

City

MERIDIANVILLE

State

AL

Zip Code

35759

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2014

Transaction ID : SA11Al.69057

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**B. LOUISE KNOELL 357**

Mailing Address 113 LAUREL BEND DR

City

MERIDIANVILLE

State

AL

Zip Code

35759

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2014

Transaction ID : SA11Al.69056

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**C. LIV KNUDSON 957**

Mailing Address 1408 GOLD CIR

City

ROCKLAND

State

CA

Zip Code

95765

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2014

Transaction ID : SA11Al.71874

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

700.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. LOUIS KNUTSON 853

Mailing Address PO BOX 1729

City  
YUMAState  
AZZip Code  
85366FEC ID number of contributing  
federal political committee.

C

Name of Employer

MIDCO COURIER

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2014

Transaction ID : SA11AI.71877

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. LEONARD KRAMER 562

Mailing Address 4045 120TH AVE NW

City  
MILANState  
MNZip Code  
56262FEC ID number of contributing  
federal political committee.

C

Name of Employer

LEONARD KRAMER CO

Occupation

FARM LAND LEASING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2014

Transaction ID : SA11AI.71929

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. MR DANIEL D KUBIN 770

Mailing Address 1701 BLOUNT ST

City  
HOUSTONState  
TXZip Code  
77008FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2014

Transaction ID : SA11AI.76462

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

520.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR DANIEL D KUBIN 770**

Mailing Address 1701 BLOUNT ST

City  
HOUSTON

State Zip Code  
TX 77008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2014

Transaction ID : SA11AI.69067

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MR DANIEL D KUBIN 770**

Mailing Address 1701 BLOUNT ST

City  
HOUSTON

State Zip Code  
TX 77008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.69068

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MR CARROLL L LARRIMORE 197**

Mailing Address 613 DOVE NEST CT

City  
MIDDLETOWN

State Zip Code  
DE 19709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11AI.69074

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. MR ARMAND F LAUZON 018

Mailing Address 1 MERIDIEN WAY

City	State	Zip Code
BILLERICA	MA	01821

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2014

Transaction ID : SA11AI.69080

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

B. MR PETER O LAWSON-JOHNSTON 100

Mailing Address 25 WEST 53RD ST  
16TH FLOOR

City	State	Zip Code
NEW YORK	NY	10019

FEC ID number of contributing federal political committee.

C

Name of Employer

GUGGENHEIM BROTHERS

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

Transaction ID : SA11AI.76496

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. FRED LAWSON 403

Mailing Address 105 CHERRYWOOD DRIVE

City	State	Zip Code
NICHOLASVILLE	KY	40356

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2014

Transaction ID : SA11AI.72018

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

725.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. JOHN LEWIS 752

Mailing Address 8226 DOUGLAS AVE, #655

City State Zip Code  
DALLAS TX 75225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ONYX EQUITY LLC

Occupation

PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 15 / 2014

Transaction ID : SA11AI.80546

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. MR MAX D LINN 881

Mailing Address PO BOX 945

City State Zip Code  
FORT SUMNER NM 88119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER - RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 16 / 2014

Transaction ID : SA11AI.66507

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. MR EDWARD A LOZICK 441

Mailing Address 29425 CHAGRIN BLVD #201  
29425 CHAGRIN BLVD STE 201

City State Zip Code  
BEACHWOOD OH 44122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SWAGLEOK COMPANY

Occupation

CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2014

Transaction ID : SA11AI.66545

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1250.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. CHRIS MANCINI 773**

Mailing Address 25707 BRIDLE FALLS

City  
MAGNOLIA

State Zip Code  
TX 77355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 18 / 2014

Transaction ID : SA11AI.72181

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. MR MICHAEL JOSEPH MANGIONE 926**

Mailing Address 3130 CORTE PORTOFINO

City  
NEWPORT BEACH

State Zip Code  
CA 92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RESTAURANT OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

02 / 24 / 2014

Transaction ID : SA11AI.76616

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. MR ROBERT MARVEL 028**

Mailing Address 1 TURTLEBACK RD  
WATCH HILL

City  
WESTERLY

State Zip Code  
RI 02891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 09 / 2014

Transaction ID : SA11AI.76643

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. THOMAS MARVIN 980**

Mailing Address 9641 NE 24TH ST

City  
CLYDE HILL

State Zip Code  
WA 98004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MICROQUILL

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2014

Transaction ID : SA11AI.80656

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. A MAY 101**

Mailing Address 15 E 91ST ST APT 5D

City  
NEW YORK

State Zip Code  
NY 10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 18 / 2014

Transaction ID : SA11AI.66677

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. JOHN D MCGOURTHY 530 SR**

Mailing Address 3339 WEST WOODLYN DRIVE

City  
MEQUON

State Zip Code  
WI 53092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 13 / 2014

Transaction ID : SA11AI.80710

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1800.00



**SCHEDULE A (FEC Form 3X)**  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR TOM MCGURK 479**

Mailing Address 7 DOUGLASS MNR

 City  
 COVINGTON

 State Zip Code  
 IN 47932

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

NONE

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 01 / 11 / 2014

Transaction ID : SA11AI.76681

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. MR DENMAN K MCNEAR 208**

Mailing Address 8300 BURDETTE RD APT 750

 City  
 BETHESDA

 State Zip Code  
 MD 20817

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 01 / 28 / 2014

Transaction ID : SA11AI.66780

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. GREG MCNECE 956**

Mailing Address PO BOX 1830

 City  
 DAVIS

 State Zip Code  
 CA 95617

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

DAVISVILLE MANAGEMENT CO

Occupation

PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 01 / 17 / 2014

Transaction ID : SA11AI.80730

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1300.00

**TOTAL** This Period (last page this line number only)..... ►

1300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. GREG MCNECE 956**

Mailing Address PO BOX 1830

City  
DAVISState  
CAZip Code  
95617FEC ID number of contributing  
federal political committee.

C

Name of Employer

DAVISVILLE MANAGEMENT CO

Occupation

PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	0		2	0	1	4

Transaction ID : SA11AI.80729

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. JOHN MCNIFF 334**

Mailing Address 11922 LOST TREE WAY

City

NORTH PALM BEACH

State

FL

Zip Code

33408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	4

Transaction ID : SA11AI.80733

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MS ISABELLE P MIDDENDORF 028**

Mailing Address 565 W MAIN RD

City

LITTLE COMPTON

State

RI

Zip Code

02837

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	4

Transaction ID : SA11AI.76730

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

1800.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MS HELEN MITCHELL 954**

Mailing Address 301 WHITE OAK DR  
UNIT 253

City State Zip Code  
SANTA ROSA CA 95409

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2014

Transaction ID : SA11AI.74870

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**B. MR ALBERT F MOGERLEY 071**

Mailing Address 173 EXPORT ST

City State Zip Code  
PORT NEWARK NJ 07114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HUDSON TANK STORAGE CO

Occupation

CHEIF EXECUTIVE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 06 / 2014

Transaction ID : SA11AI.76758

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. MR AL MOORE 631**

Mailing Address 9910 PAGE AVE

City State Zip Code  
SAINT LOUIS MO 63132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MFD

Occupation

FOOD DISTRIBUTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 27 / 2014

Transaction ID : SA11AI.66925

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

795.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR CHERNA MOSKOWITZ 331**

Mailing Address 4744 N BAY RD

City

MIAMI BEACH

State

FL

Zip Code

33140

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 10 / 2014

Transaction ID : SA11AI.69204

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. CAROL MOSS 933**

Mailing Address 5330 OFFICE CENTER COURT

City

BAKERSFIELD

State

CA

Zip Code

93309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 27 / 2014

Transaction ID : SA11AI.72520

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MRS JACQUELINE NAGEL 672**

Mailing Address 4 E LYNWOOD BLVD

City

EASTBOROUGH

State

KS

Zip Code

67207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FG HALL COMPANY

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

01 / 14 / 2014

Transaction ID : SA11AI.66995

Amount of Each Receipt this Period

750.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. DR HERBERT J NEVYAS 190 MD**

Mailing Address 1120 TOWER LN E

City

PENN VALLEY

State

PA

Zip Code

19072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2014

Transaction ID : SA11AI.67025

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. PHYLLIS NICHOLAS 068**

Mailing Address 40 HOWARD ROAD

City

GREENWICH

State

CT

Zip Code

06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2014

Transaction ID : SA11AI.80909

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. PHYLLIS NICHOLAS 068**

Mailing Address 40 HOWARD ROAD

City

GREENWICH

State

CT

Zip Code

06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2014

Transaction ID : SA11AI.80907

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. BRUCE NICHOLSON 873**

Mailing Address 920 E HISTORIC HIGHWAY 66

City  
GALLUP

State Zip Code  
NM 87301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2014

Transaction ID : SA11AI.72619

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MS MARILYN NIELSON 902**

Mailing Address 7 SILVERLEAF DR

City

ROLLING HILLS ESTA

State Zip Code  
CA 90274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2014

Transaction ID : SA11AI.67035

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. GEORGE W OLSON 662**

Mailing Address 5206 W 80TH TERRACE

City

PRAIRIE VILLAGE

State Zip Code  
KS 66208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2014

Transaction ID : SA11AI.76853

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

650.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR ROBERT S PERKIN 068**

Mailing Address 160 BROOKSIDE RD

City

DARIEN

State

CT

Zip Code

06820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MUSIC INSTRUCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 05 / 2014

**Transaction ID : SA11AI.76913**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. MR JORDON PERLMUTTER 802**

Mailing Address PO BOX 480070

City

DENVER

State

CO

Zip Code

80248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JORDON PERLMUTTER & CO

Occupation

RE INVESTMENT & DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 27 / 2014

**Transaction ID : SA11AI.67194**

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**C. MRS ANTHONY POGODZINSKI 545**

Mailing Address 9609 MANITOU PARK DR

City

MINOCQUA

State

WI

Zip Code

54548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 24 / 2014

**Transaction ID : SA11AI.67258**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MRS ANTHONY POGODZINSKI 545**

Mailing Address 9609 MANITOU PARK DR

City State Zip Code  
MINOCQUA WI 54548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 29 / 2014

Transaction ID : SA11AI.81100

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. MRS ANTHONY POGODZINSKI 545**

Mailing Address 9609 MANITOU PARK DR

City State Zip Code  
MINOCQUA WI 54548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2014

Transaction ID : SA11AI.81103

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. MRS ANTHONY POGODZINSKI 545**

Mailing Address 9609 MANITOU PARK DR

City State Zip Code  
MINOCQUA WI 54548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 06 / 2014

Transaction ID : SA11AI.81102

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR ROBERT H POTTS 341**

Mailing Address 150 MOORINGS PARK DR APT 207

City State Zip Code  
 NAPLES FL 34105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 / 24 / 2014

Transaction ID : SA11AI.76957

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. MR JOHN RADY 480**

Mailing Address 32345 DRURY LN

City State Zip Code  
 BEVERLY HILLS MI 48025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 01 / 27 / 2014

Transaction ID : SA11AI.67326

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. DONALD REINHARD 180**

Mailing Address 75 HARVARD AVE

City State Zip Code  
 PALMERTON PA 18071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENCOR SERVICES INC

Occupation

SEMI RETIRED EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 01 / 22 / 2014

Transaction ID : SA11AI.81182

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. DONALD REINHARD 180**

Mailing Address 75 HARVARD AVE

City  
PALMERTON

State Zip Code  
PA 18071

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PENCOR SERVICES INC

Occupation  
SEMI RETIRED EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA11AI.81181

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. QUENTIN REMEIN 208**

Mailing Address 18 WYNKOOP CT

City  
BETHESDA

State Zip Code  
MD 20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 30 / 2014

Transaction ID : SA11AI.67375

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. MR ERIK RENKEN 774**

Mailing Address 401 OSCAR ST

City  
EL CAMPO

State Zip Code  
TX 77437

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
POWER INC

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2014

Transaction ID : SA11AI.78481

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MRS CAROLYN RIDGEWAY 590**

Mailing Address 609 BLUEBIRD LN

City  
LIVINGSTON

State Zip Code  
MT 59047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 10 / 2014

Transaction ID : SA11AI.67425

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. KATHLEEN ROGERS 770**

Mailing Address 5730 WIGTON

City  
HOUSTON

State Zip Code  
TX 77096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

02 / 24 / 2014

Transaction ID : SA11AI.81236

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. KATHLEEN ROGERS 770**

Mailing Address 5730 WIGTON

City  
HOUSTON

State Zip Code  
TX 77096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

03 / 04 / 2014

Transaction ID : SA11AI.81232

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. KATHLEEN ROGERS 770**

Mailing Address 5730 WIGTON

City  
HOUSTON

State Zip Code  
TX 77096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2014

Transaction ID : SA11AI.81230

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. KATHLEEN ROGERS 770**

Mailing Address 5730 WIGTON

City  
HOUSTON

State Zip Code  
TX 77096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2014

Transaction ID : SA11AI.81233

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. KATHLEEN ROGERS 770**

Mailing Address 5730 WIGTON

City  
HOUSTON

State Zip Code  
TX 77096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2014

Transaction ID : SA11AI.81234

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

135.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR CHARLES L ROMERO 945**

Mailing Address 8160 CROW CANYON RD

City State Zip Code  
 CASTRO VALLEY CA 94552

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 RODAK PLASTICS INC

Occupation  
 MOLD MAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 14 2014

**Transaction ID : SA11AI.67490**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. MRS NANCY B ROTH 939**

Mailing Address 8545 CARMEL VALLEY RD

City State Zip Code  
 CARMEL CA 93923

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 RETIRED

Occupation  
 HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 13 2014

**Transaction ID : SA11AI.77074**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. MS ELIZABETH M RUFFIN 276**

Mailing Address 1707 JARVIS ST

City State Zip Code  
 RALEIGH NC 27608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 RETIRED

Occupation  
 HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 07 2014

**Transaction ID : SA11AI.77084**

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. NICK RUNNEBOHM 461**

Mailing Address 3177 S 375 E

City

SHELBYVILLE

State

IN

Zip Code

46176

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RUNNEBOHM CONSTRUCTION CO INC

Occupation

GENERAL CONTRACTOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 16 / 2014

**Transaction ID : SA11AI.81265**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. DR DAVID S RUSSELL 737 MD**

Mailing Address 2113 WILSHIRE DR

City

ENID

State

OK

Zip Code

73703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2014

**Transaction ID : SA11AI.69363**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. JOHN W SAMPSON 339**

Mailing Address 9614 PARKWOOD CT

City

FORT MYERS

State

FL

Zip Code

33908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

6S RANCH

Occupation

OWNER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 21 / 2014

**Transaction ID : SA11AI.67572**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. JOHN W SAMPSON 339**

Mailing Address 9614 PARKWOOD CT

City State Zip Code  
FORT MYERS FL 33908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

6S RANCH

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 21 / 2014

Transaction ID : SA11AI.67574

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. JOHN W SAMPSON 339**

Mailing Address 9614 PARKWOOD CT

City State Zip Code  
FORT MYERS FL 33908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

6S RANCH

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2014

Transaction ID : SA11AI.67573

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MR ROBERT W SCHNEEBECK 342**

Mailing Address 741 N MANASOTA KEY RD

City State Zip Code  
ENGLEWOOD FL 34223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STRATEGIC INSURANCE UNDERWRITR

Occupation

INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2014

Transaction ID : SA11AI.77140

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. DR ROBERT SEPERSKY 023 MD**

Mailing Address 65 SOUTHWORTH ST

City State Zip Code  
 LAKEVILLE MA 02347

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 01 23 2014

Transaction ID : SA11AI.81366

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. PATRICIA SERIO 917**

Mailing Address 20134 DAMERAL DRIVE

City State Zip Code  
 COVINA CA 91724

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SERCO

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 12 2014

Transaction ID : SA11AI.81368

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. MRS MYRTLE SERVAT 705**

Mailing Address 601 WILTZ ST

City State Zip Code  
 RAYNE LA 70578

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 31 2014

Transaction ID : SA11AI.69416

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. ROBERT SHAFFER 201**

Mailing Address PO BOX 295

City State Zip Code  
CATLETT VA 20119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

CAPTAIN USN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 04 / 2014

Transaction ID : SA11AI.81373

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. ISAAC SHERMAN 100**

Mailing Address 1050 FIFTH AVE

City State Zip Code  
NEW YORK NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SHERMAN & GORDON, PC

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 23 / 2014

Transaction ID : SA11AI.81394

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. DR GARY L SMIDT 500**

Mailing Address 3293 NW BROOKSTON LN #12

City State Zip Code  
ANKENY IA 50023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 13 / 2014

Transaction ID : SA11AI.67791

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. DR GARY L SMIDT 500**

Mailing Address 3293 NW BROOKSTON LN #12

City State Zip Code  
 ANKENY IA 50023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 / 03 / 2014

**Transaction ID : SA11AI.67790**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. RICHARD SREDNICKI 804**

Mailing Address 33575 DREAMCATCHER TRL

City State Zip Code  
 STEAMBOAT SPRINGS CO 80487

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHASE BANK

Occupation

CEO - CARD SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 / 11 / 2014

**Transaction ID : SA11AI.67874**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MR MICHAEL STEPANIAN 146**

Mailing Address 1400 WIND WILLOW WAY #15

City State Zip Code  
 ROCHESTER NY 14624

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 02 / 03 / 2014

**Transaction ID : SA11AI.67913**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

## **A. MS GLORIA TYLER STEVENS 342**

Mailing Address 3091 HIGHLANDS BRIDGE RD

City State Zip Code  
SARASOTA FL 34235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2014

**Transaction ID : SA11AI.67920**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. WALTER STEVENSON 341 MD**

Mailing Address 7819 COCOBAY CT

City State Zip Code  
NAPLES FL 34108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 14 / 2014

**Transaction ID : SA11AI.81520**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. MR DWIGHT H SWANSON 503**

Mailing Address 13731 HICKMAN RD UNIT 3201  
DEERFIELD # 3201

City State Zip Code  
URBANDALE IA 50323

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 27 / 2014

**Transaction ID : SA11AI.68008**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR LENARD THOMAS 926**

Mailing Address 120 IRVINE COVE CT

City State Zip Code  
LAGUNA BEACH CA 92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 21 / 2014

Transaction ID : SA11AI.68062

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

**B. MR ROBERT S TROTH 341**

Mailing Address 3003 GULF SHORE BLVD N APT 301

City State Zip Code  
NAPLES FL 34103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 06 / 2014

Transaction ID : SA11AI.69519

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. MR EARL M VAN BEBBER 953**

Mailing Address 2447 ALTOGA AVE

City State Zip Code  
TRACY CA 95376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VAN BEBBER LTD PARTNERS

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.69536

Amount of Each Receipt this Period

1560.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2610.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. RICHARD VOELL 068**

Mailing Address 25 PILOT ROCK LANE

City  
RIVERSIDE

State Zip Code  
CT 06878

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 08 / 2014

Transaction ID : SA11AI.81775

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. RICHARD VOELL 068**

Mailing Address 25 PILOT ROCK LANE

City  
RIVERSIDE

State Zip Code  
CT 06878

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 14 / 2014

Transaction ID : SA11AI.81776

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. ARLYN WADHOLM 587**

Mailing Address 8951 32ND ST NW

City  
NEW TOWN

State Zip Code  
ND 58763

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 16 / 2014

Transaction ID : SA11AI.75160

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. ARLYN WADHOLM 587**

Mailing Address 8951 32ND ST NW

City  
NEW TOWN

State Zip Code  
ND 58763

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY  
02 / 22 / 2014

Transaction ID : SA11AI.78692

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. ARLYN A WADHOLM 587**

Mailing Address 8951 32ND ST NW

City  
NEW TOWN

State Zip Code  
ND 58763

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 05 / 2014

Transaction ID : SA11AI.73935

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MARY ANN WATSON 381**

Mailing Address 172 PLAINVIEW ST

City  
MEMPHIS

State Zip Code  
TN 38111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2014

Transaction ID : SA11AI.78708

Amount of Each Receipt this Period

80.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

830.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

## **A. GURDON WATTLES 101**

Mailing Address 45 ROCKEFELLER PLZ STE 630

City State Zip Code  
NEW YORK NY 10111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2014

Transaction ID : SA11AI.73996

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. MARC WEISS 100**

Mailing Address 32 W 18TH ST

City State Zip Code  
NEW YORK NY 10011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GLOBAL INTERNET ENT

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 09 / 2014

Transaction ID : SA11AI.74020

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. ANN WELDEN 223**

Mailing Address 3735 LYONS LANE

City State Zip Code  
ALEXANDRIA VA 22302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

FORMER FOREIGN SERVICE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2014

Transaction ID : SA11AI.81837

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MS RUTH WIEGMAN 448**

Mailing Address PO BOX 43

City

CHATFIELD

State

OH

Zip Code

44825

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2014

Transaction ID : SA11AI.69589

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MRS MAUDE WILLBERN 783**

Mailing Address PO BOX 86

City

BISHOP

State

TX

Zip Code

78343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2014

Transaction ID : SA11AI.68330

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**C. MRS MAUDE WILLBERN 783**

Mailing Address PO BOX 86

City

BISHOP

State

TX

Zip Code

78343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2014

Transaction ID : SA11AI.69602

Amount of Each Receipt this Period

900.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 73 OF 145

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. MR EDWARD G WONG 921**

Mailing Address 11186 PACEMONT LN

City

SAN DIEGO

State

CA

Zip Code

92126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2014

Transaction ID : SA11AI.77586

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

80370.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. SCOTT B MACKENZIE**

Mailing Address 2776 S ARLINGTON MILL DRIVE  
#806

City State Zip Code  
ARLINGTON VA 22206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MACKENZIE & COMPANY

Occupation  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 24 2014

Transaction ID : SA13.78810

Amount of Each Receipt this Period

700.00

PERSONAL LOAN

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 145

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PKWY  
SUITE 350

City State Zip Code  
LANSDOWNE VA 20176

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.87

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 14 / 2014

Transaction ID : SA17.78814

Amount of Each Receipt this Period

1134.87

LIST RENTAL INCOME

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PKWY  
SUITE 350

City State Zip Code  
LANSDOWNE VA 20176

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1489.50

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2014

Transaction ID : SA17.78815

Amount of Each Receipt this Period

354.63

LIST RENTAL INCOME

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PKWY  
SUITE 350

City State Zip Code  
LANSDOWNE VA 20176

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3152.31

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2014

Transaction ID : SA17.78816

Amount of Each Receipt this Period

1662.81

LIST RENTAL INCOME

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3152.31

3152.31

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 145

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

## **A. CUCCINELLI FOR GOVERNOR**

Mailing Address 115 E GRACE ST

City

RICHMOND

State

VA

Zip Code

23219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA16.78813

Amount of Each Receipt this Period

1.00

CONTRIBUTION REFUND OF EXCESSIVE AMOUNT

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1.00

1.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**Mailing Address 44084 RIVERSIDE PKWY  
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
eMAIL SOLICITATIONS

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
02 04 2014

Transaction ID : SB21B.81950

Amount of Each Disbursement this Period

26309.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**Mailing Address 44084 RIVERSIDE PKWY  
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
eMAIL SOLICITATIONS

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
02 11 2014

Transaction ID : SB21B.81951

Amount of Each Disbursement this Period

8534.75

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**Mailing Address 44084 RIVERSIDE PKWY  
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
eMAIL SOLICITATIONS

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
02 18 2014

Transaction ID : SB21B.81952

Amount of Each Disbursement this Period

2165.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37008.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**Mailing Address 44084 RIVERSIDE PKWY  
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
eMAIL SOLICITATIONS

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
02 25 2014

Transaction ID : SB21B.81953

Amount of Each Disbursement this Period

8100.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**Mailing Address 44084 RIVERSIDE PKWY  
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
eMAIL SOLICITATIONS

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 05 2014

Transaction ID : SB21B.81954

Amount of Each Disbursement this Period

1350.00

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**Mailing Address 44084 RIVERSIDE PKWY  
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
eMAIL SOLICITATIONS

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 11 2014

Transaction ID : SB21B.81955

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10950.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**Mailing Address 44084 RIVERSIDE PKWY  
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
eMAIL SOLICITATIONS

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 25 2014

Transaction ID : SB21B.81956

Amount of Each Disbursement this Period

10353.00

Full Name (Last, First, Middle Initial)

**B. AMBASSADOR ACCOUNTING INC**

Mailing Address 7521 PRESIDENTIAL LN

City MANASSAS State VA Zip Code 20109

Purpose of Disbursement  
ESCROW SERVICES

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
02 04 2014

Transaction ID : SB21B.81957

Amount of Each Disbursement this Period

125.67

Full Name (Last, First, Middle Initial)

**C. AMBASSADOR ACCOUNTING INC**

Mailing Address 7521 PRESIDENTIAL LN

City MANASSAS State VA Zip Code 20109

Purpose of Disbursement  
ESCROW SERVICES

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
02 28 2014

Transaction ID : SB21B.81959

Amount of Each Disbursement this Period

74.23

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10552.90







**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. AMERICAN LIBERTY GROUP LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	1	4		

Mailing Address 611 PENNSYLVANIA AVE SE  
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TELEMARKETING SERVICES

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB21B.69650**

Amount of Each Disbursement this Period

17290.86

Full Name (Last, First, Middle Initial)

**B. AMERICAN LIBERTY GROUP LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	1	4		

Mailing Address 611 PENNSYLVANIA AVE SE  
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TELEMARKETING SERVICES

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB21B.69651**

Amount of Each Disbursement this Period

3718.66

Full Name (Last, First, Middle Initial)

**C. AMERICAN LIBERTY GROUP LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	1	4		

Mailing Address 611 PENNSYLVANIA AVE SE  
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TELEMARKETING SERVICES

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB21B.69652**

Amount of Each Disbursement this Period

2049.87

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2	3	0	5	9	.	8	6
---	---	---	---	---	---	---	---











<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

### A. CAPITOL CAGING CORP

Date of Disbursement

Transaction ID : SB21B.68544

00:

Amount of Each Disbursement this Period

Category/  
Type

585.58

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

## B. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M / D D / Y Y Y Y  
01 02 2014

Transaction ID : SB21B.64375

Amount of Each Disbursement this Period

00:

Category/  
Type

10223.63

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

### C. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M / D D / Y Y Y Y  
01 09 2014

Transaction ID : SB21B.64376

Amount of Each Disbursement this Period

003

Category/  
Type

14588.95

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

25398.16

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. CENTURY DATA MAILING SERVICES**Mailing Address 1155 - 15TH STREET, NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGE

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
01 24 2014

Transaction ID : SB21B.64377

Amount of Each Disbursement this Period

12101.03

Full Name (Last, First, Middle Initial)

**B. CENTURY DATA MAILING SERVICES**Mailing Address 1155 - 15TH STREET, NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGE

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
02 07 2014

Transaction ID : SB21B.64378

Amount of Each Disbursement this Period

7646.74

Full Name (Last, First, Middle Initial)

**C. CENTURY DATA MAILING SERVICES**Mailing Address 1155 - 15TH STREET, NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGE

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
02 12 2014

Transaction ID : SB21B.64379

Amount of Each Disbursement this Period

18783.09

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38530.86

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. CENTURY DATA MAILING SERVICES**Mailing Address 1155 - 15TH STREET, NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGE

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 25 2014

Transaction ID : SB21B.64380

Amount of Each Disbursement this Period

10534.00

Full Name (Last, First, Middle Initial)

**B. CENTURY DATA MAILING SERVICES**Mailing Address 1155 - 15TH STREET, NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGE

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 06 2014

Transaction ID : SB21B.64381

Amount of Each Disbursement this Period

9575.28

Full Name (Last, First, Middle Initial)

**C. CENTURY DATA MAILING SERVICES**Mailing Address 1155 - 15TH STREET, NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGE

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 20 2014

Transaction ID : SB21B.68545

Amount of Each Disbursement this Period

15417.87

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35527.15



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 92 OF 145

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. COLORTREE**

Mailing Address 2519 BRITTONS HILL RD

City RICHMOND      State VA      Zip Code 23230

Purpose of Disbursement  
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      20      2014

Transaction ID : SB21B.68546

Amount of Each Disbursement this Period

6580.40

Full Name (Last, First, Middle Initial)

**B. CONSOLIDATED MAILING SERVICES**Mailing Address 504 SHAW ROAD  
SUITE 206

City STERLING      State VA      Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01      09      2014

Transaction ID : SB21B.64429

Amount of Each Disbursement this Period

5155.70

Full Name (Last, First, Middle Initial)

**C. CONSOLIDATED MAILING SERVICES**Mailing Address 504 SHAW ROAD  
SUITE 206

City STERLING      State VA      Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01      24      2014

Transaction ID : SB21B.64430

Amount of Each Disbursement this Period

4985.99

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16722.09





<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

#### A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.64411

001

Category/  
Type

Amount of Each Disbursement this Period

35.00

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

**B. FIRST VIRGINIA COMMUNITY BANK**

Date of Disbursement

Transaction ID : SB21B.64389

001

Category/  
Type

Amount of Each Disbursement this Period

49.00

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

### C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

A diagram of a three-part card. The first part is labeled 'M M' and contains the number '01'. The second part is labeled 'D D' and contains the number '21'. The third part is labeled 'Y Y Y Y' and contains the year '2014'. The parts are separated by slashes.

Transaction ID : SB21B.64390

001

Category/  
Type

Amount of Each Disbursement this Period

26.25

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

110.25



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. FIRST VIRGINIA COMMUNITY BANK**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
0	1		2	7		2	0	1	4		

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

**Transaction ID : SB21B.64391**Purpose of Disbursement  
AMEX DISCOUNT FEE

001

Amount of Each Disbursement this Period

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type

25.73

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. FIRST VIRGINIA COMMUNITY BANK**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
0	1		2	8		2	0	1	4		

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

**Transaction ID : SB21B.64409**Purpose of Disbursement  
AMEX COLLECTION FEE

001

Amount of Each Disbursement this Period

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type

7.95

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. FIRST VIRGINIA COMMUNITY BANK**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
0	1		3	1		2	0	1	4		

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

**Transaction ID : SB21B.64392**Purpose of Disbursement  
AMEX DISCOUNT FEE

001

Amount of Each Disbursement this Period

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type

3.50

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.18



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 97 OF 145

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
AMEX DISCOUNT FEES - ALG

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01      31      2014
**Transaction ID : SB21B.69660**

Amount of Each Disbursement this Period

245.02

Full Name (Last, First, Middle Initial)

**B. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGES - ALG

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01      31      2014
**Transaction ID : SB21B.69663**

Amount of Each Disbursement this Period

2359.21

Full Name (Last, First, Middle Initial)

**C. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
SERVICE CHARGE

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      03      2014
**Transaction ID : SB21B.64385**

Amount of Each Disbursement this Period

148.92

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2753.15

148.92

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 98 OF 145

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      03      2014
**Transaction ID : SB21B.64393**

Amount of Each Disbursement this Period

17.50

Full Name (Last, First, Middle Initial)

**B. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      03      2014
**Transaction ID : SB21B.64394**

Amount of Each Disbursement this Period

3.68

Full Name (Last, First, Middle Initial)

**C. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
ACCOUNT ANALYSIS CHARGE - ALG

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      03      2014
**Transaction ID : SB21B.69658**

Amount of Each Disbursement this Period

126.34

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

147.52

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 99 OF 145

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought:   ☐ House  
                       ☐ Senate  
                       ☐ President

Disbursement For:   ☐ Primary   ☐ General  
                              ☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      04      2014
**Transaction ID : SB21B.64395**

Amount of Each Disbursement this Period

1.23

Full Name (Last, First, Middle Initial)

**B. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
CUSTOM CREDIT BILLING

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought:   ☐ House  
                       ☐ Senate  
                       ☐ President

Disbursement For:   ☐ Primary   ☐ General  
                              ☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      05      2014
**Transaction ID : SB21B.64413**

Amount of Each Disbursement this Period

63.50

Full Name (Last, First, Middle Initial)

**C. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought:   ☐ House  
                       ☐ Senate  
                       ☐ President

Disbursement For:   ☐ Primary   ☐ General  
                              ☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      10      2014
**Transaction ID : SB21B.64396**

Amount of Each Disbursement this Period

5.96

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.69

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

#### A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement



Transaction ID : SB21B.64397

00:

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

**B. FIRST VIRGINIA COMMUNITY BANK**

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.64398

00

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

Response	Percentage
Yes	0.88

### C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.64417

00-

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

348.01

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

353.09

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

#### A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement



Transaction ID : SB21B.64399

00:

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.68
25-34	
35-44	
45-54	
55-64	
65-74	
75-84	
85+	

**B. FIRST VIRGINIA COMMUNITY BANK**

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.64400

00

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

7.00

### C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.64401

00-

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Amount of Each Disbursement this Period

13.66

31.34

FEC Schedule B (Form 3X) Rev. 02/2003

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

#### A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.64402

00:

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

0.88

**B. FIRST VIRGINIA COMMUNITY BANK**

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.64410

00

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

7.95

### C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.69661

00-

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

321.87

**SUBTOTAL** of Disbursements This Page (optional).....

330.70

**TOTAL** This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

#### A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.69664

00:

Category/  
Type

Amount of Each Disbursement this Period

2519.09

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

**B. FIRST VIRGINIA COMMUNITY BANK**

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.64386

00

Category/  
Type

Amount of Each Disbursement this Period

Age Group	Number of People
13-17	186.41
18-24	150.00
25-34	125.00
35-44	100.00
45-54	75.00
55-64	50.00
65-74	25.00
75-84	12.50
85+	6.25

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

### C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.64403

00-

Category/  
Type

Amount of Each Disbursement this Period

6.48

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2711.98

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
ACCOUNT ANALYSIS CHARGE - ALG

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 03 / 2014
**Transaction ID : SB21B.69659**

Amount of Each Disbursement this Period

144.54

Full Name (Last, First, Middle Initial)

**B. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 04 / 2014
**Transaction ID : SB21B.64404**

Amount of Each Disbursement this Period

0.88

Full Name (Last, First, Middle Initial)

**C. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
CUSTOM CREDIT BILLING

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 07 / 2014
**Transaction ID : SB21B.64414**

Amount of Each Disbursement this Period

81.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

226.42



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

#### A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.64415

001

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

397.87

**B. FIRST VIRGINIA COMMUNITY BANK**

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.64405

001

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

6.13

### C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.64406

001

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

1.40

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

405.40

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

#### A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.64407

001

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.0%
25-34	10.0%
35-44	10.0%
45-54	10.0%
55-64	10.0%
65-74	10.0%
75-84	10.0%
85+	7.70%

**B. FIRST VIRGINIA COMMUNITY BANK**

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.64408

001

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	12%
25-34	18%
35-44	22%
45-54	25%
55-64	28%
65-74	30%
75-84	32%
85+	1.23%

### C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.68547

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Amount of Each Disbursement this Period

1.40

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

10.33

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

#### A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement



Transaction ID : SB21B.68549

00:

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

7.95

**B. FIRST VIRGINIA COMMUNITY BANK**

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.68548

00

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

### C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Transaction ID : SB21B.69662

00-

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

#### A. FIRST VIRGINIA COMMUNITY BANK

Transaction ID : SB21B.69665

001

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

1683.89

## B. INTEGRAM

Transaction ID : SB21B.64433

003

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

3911.20

### C. INTEGRAM

Transaction ID : SB21B.78790

003

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

7500.00

13095.09

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. INTEGRAM**

Mailing Address 8421 HILLTOP ROAD

City  
FAIRFAXState  
VAZip Code  
22031Purpose of Disbursement  
DIRECT MAIL - PRINTING & MAILSHOP (OPR)

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

**Transaction ID : SB21B.78791**

Amount of Each Disbursement this Period

5809.26

Full Name (Last, First, Middle Initial)

**B. LEGACY LIST MANAGEMENT INC**Mailing Address 1155 - 15TH STREET, NW  
SUITE 410City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
DIRECT MAIL - LIST RENTALS

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2014

**Transaction ID : SB21B.64435**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MACKENZIE & COMPANY**

Mailing Address 2776 S ARLINGTON MILL DR #806

City  
ARLINGTONState  
VAZip Code  
22206Purpose of Disbursement  
CONSULTING - COMPLIANCE (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2014

**Transaction ID : SB21B.78792**

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11309.26
----------

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

5000.00

5000.00

1344.57

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

A. E M SEILER

Three 7-segment displays are shown, each with a label above it: 'M M', 'D D', and 'Y Y Y Y'. The first display shows '01', the second shows '08', and the third shows '2014'. The displays are connected to a common bus system.

001

1000.00

## THE CONSERVATIVE STRIKEFORCE

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

B. E M SEILER

Date of Disbursement

Mailing Address 683 BERRYVILLE AVE

City	State	Zip Code
WINCHESTER	VA	22601

Purpose of Disbursement	CAGING & DATA ENTRY SERVICES (OPR)
-------------------------	------------------------------------

001

Transaction ID : SB21B.78796

Amount of Each Disbursement this Period

Candidate Name

## THE CONSERVATIVE STRIKEFORCE

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

C. E M SEILER

Date of Disbursement

M M / D D / Y Y Y Y  
02 26 2014

Mailing Address 683 BERRYVILLE AVE

City	State	Zip Code
WINCHESTER	VA	22601

Purpose of Disbursement	CAGING & DATA ENTRY SERVICES (OPR)
-------------------------	------------------------------------

001

Transaction ID : SB21B.78797

Amount of Each Disbursement this Period

Candidate Name

## THE CONSERVATIVE STRIKEFORCE

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3700.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## THE CONSERVATIVE STRIKEFORCE

A. E M SEILER

Three 16-bit registers are shown, each with a 4-bit address above and a 12-bit value below. The first register has address MM and value 03. The second register has address DD and value 31. The third register has address YYYY and value 2014.

001

720.00

## THE CONSERVATIVE STRIKEFORCE

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

## B. SIMPKINS ESCROW

001

## THE CONSERVATIVE STRIKEFORCE

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

### C. SIMPKINS ESCROW

Three digital displays showing the date in MM/DD/YYYY format: 03/20/2014.

001

581.18

## THE CONSERVATIVE STRIKEFORCE

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

1657.25



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 113 OF 145

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. STRATEGIC CAMPAIGN GROUP INC**Mailing Address 4600 N FAIRFAX DRIVE  
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement  
CONSULTING - MANAGEMENT (OPR)

001

Category/  
Type

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 07 2014

Transaction ID : SB21B.78799

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. STRATEGIC CAMPAIGN GROUP INC**Mailing Address 4600 N FAIRFAX DRIVE  
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement  
DIRECT MAIL - PRINTING & MAILSHOP (OPR)

001

Category/  
Type

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 27 2014

Transaction ID : SB21B.78802

Amount of Each Disbursement this Period

22000.00

Full Name (Last, First, Middle Initial)

**C. STRATEGIC CAMPAIGN GROUP INC**Mailing Address 4600 N FAIRFAX DRIVE  
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement  
CONSULTING - MANAGEMENT (OPR)

001

Category/  
Type

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 05 2014

Transaction ID : SB21B.78800

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

32000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. TARGET OUTREACH INC**Mailing Address 700 W VIRGINIA ST  
SUITE 700

City MILWAUKEE      State WI      Zip Code 53204

Purpose of Disbursement  
TELEMARKETING SERVICES (OPR)

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
01 / 08 / 2014

Transaction ID : SB21B.78809

Amount of Each Disbursement this Period

335.00

Full Name (Last, First, Middle Initial)

**B. TARGET OUTREACH INC**Mailing Address 700 W VIRGINIA ST  
SUITE 700

City MILWAUKEE      State WI      Zip Code 53204

Purpose of Disbursement  
TELEMARKETING SERVICES (OPR)

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
01 / 22 / 2014

Transaction ID : SB21B.78805

Amount of Each Disbursement this Period

985.00

Full Name (Last, First, Middle Initial)

**C. TARGET OUTREACH INC**Mailing Address 700 W VIRGINIA ST  
SUITE 700

City MILWAUKEE      State WI      Zip Code 53204

Purpose of Disbursement  
TELEMARKETING SERVICES (OPR)

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
01 / 24 / 2014

Transaction ID : SB21B.78806

Amount of Each Disbursement this Period

4538.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5858.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. TARGET OUTREACH INC**Mailing Address 700 W VIRGINIA ST  
SUITE 700

City MILWAUKEE    State WI    Zip Code 53204

Purpose of Disbursement  
TELEMARKETING SERVICES (OPR)

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 03 / 2014**Transaction ID : SB21B.78807**

Amount of Each Disbursement this Period

1651.00

Full Name (Last, First, Middle Initial)

**B. TARGET OUTREACH INC**Mailing Address 700 W VIRGINIA ST  
SUITE 700

City MILWAUKEE    State WI    Zip Code 53204

Purpose of Disbursement  
TELEMARKETING SERVICES (OPR)

003

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 21 / 2014**Transaction ID : SB21B.78808**

Amount of Each Disbursement this Period

2665.00

Full Name (Last, First, Middle Initial)

**C. US POSTMASTER**

Mailing Address MAIN POST OFFICE

City WASHINGTON    State DC    Zip Code 20001

Purpose of Disbursement  
PO BOX RENEWAL - ALG

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 28 / 2014**Transaction ID : SB21B.69666**

Amount of Each Disbursement this Period

580.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4896.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City ALEXANDRIA    State VA    Zip Code 22302

Purpose of Disbursement  
RIGHT OF SETOFF FEES (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 06 / 2014
**Transaction ID : SB21B.78781**

Amount of Each Disbursement this Period

103.80

Full Name (Last, First, Middle Initial)

**B. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City ALEXANDRIA    State VA    Zip Code 22302

Purpose of Disbursement  
NSF FEE (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 15 / 2014
**Transaction ID : SB21B.78783**

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**C. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City ALEXANDRIA    State VA    Zip Code 22302

Purpose of Disbursement  
SERVICE CHARGE (TOR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 17 / 2014
**Transaction ID : SB21B.78765**

Amount of Each Disbursement this Period

14.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

129.80

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 118 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City	State	Zip Code
ALEXANDRIA	VA	22302

Purpose of Disbursement  
TRANSACTION FEE (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2014

**Transaction ID : SB21B.78786**

Amount of Each Disbursement this Period

379.00
--------

Full Name (Last, First, Middle Initial)

**B. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City	State	Zip Code
ALEXANDRIA	VA	22302

Purpose of Disbursement  
MONERIS DISCOUNT FEES (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

**Transaction ID : SB21B.78774**

Amount of Each Disbursement this Period

244.55
--------

Full Name (Last, First, Middle Initial)

**C. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City	State	Zip Code
ALEXANDRIA	VA	22302

Purpose of Disbursement  
AUTHNET GATEWAY BILLING FEE (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2014

**Transaction ID : SB21B.78779**

Amount of Each Disbursement this Period

30.00
-------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

653.55

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 119 OF 145

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City ALEXANDRIA    State VA    Zip Code 22302

Purpose of Disbursement  
MERCANT SERVICE CHARGE (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02    05    2014
**Transaction ID : SB21B.78776**

Amount of Each Disbursement this Period

12.95

Full Name (Last, First, Middle Initial)

**B. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City ALEXANDRIA    State VA    Zip Code 22302

Purpose of Disbursement  
RIGHT OF SETOFF FEES (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02    05    2014
**Transaction ID : SB21B.78782**

Amount of Each Disbursement this Period

113.39

Full Name (Last, First, Middle Initial)

**C. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City ALEXANDRIA    State VA    Zip Code 22302

Purpose of Disbursement  
NSF FEE (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02    05    2014
**Transaction ID : SB21B.78784**

Amount of Each Disbursement this Period

35.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.34







**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 122 OF 145

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

Full Name (Last, First, Middle Initial)

**A. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City	State	Zip Code
ALEXANDRIA	VA	22302

Purpose of Disbursement  
MONERIS DISCOUNT FEES (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		03		2014

**Transaction ID : SB21B.78775**

Amount of Each Disbursement this Period

50.65
-------

Full Name (Last, First, Middle Initial)

**B. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City	State	Zip Code
ALEXANDRIA	VA	22302

Purpose of Disbursement  
MERCANT SERVICE CHARGE (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		03		2014

**Transaction ID : SB21B.78777**

Amount of Each Disbursement this Period

12.95
-------

Full Name (Last, First, Middle Initial)

**C. WELLS FARGO BANK**

Mailing Address 1711 FERN ST

City	State	Zip Code
ALEXANDRIA	VA	22302

Purpose of Disbursement  
AUTHNET GATEWAY BILLING FEE (OPR)

001

Candidate Name

**THE CONSERVATIVE STRIKEFORCE**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2014

**Transaction ID : SB21B.78780**

Amount of Each Disbursement this Period

30.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

93.60
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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

## THE CONSERVATIVE STRIKEFORCE

### A. FRIENDS OF DAVID JOLLY

Date of Disbursement

Transaction ID : SB23.78812

01:

Category/  
Type

Special-General

Amount of Each Disbursement this Period

Date of Disbursement

### Purpose of Disbursement

Candidate Name	
1	1
2	2
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99	99
100	100

Category/  
Type

Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

Date of Disbursement

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

A diagram of a rectangular frame. It consists of a horizontal beam at the top and a horizontal beam at the bottom, connected by vertical supports. The top beam has 10 evenly spaced vertical hangers. The bottom beam has 10 evenly spaced vertical hangers. The left vertical support is a single line. The right vertical support is a single line. The frame is open on the right side.

**SUBTOTAL** of Disbursements This Page (optional).....

5000.00

**TOTAL** This Period (last page this line number only).....

5000.00

	21b		22		23		24		25	<b>X</b>	26
	27		28a		28b		28c		29		30b

## THE CONSERVATIVE STRIKEFORCE

**A. SCOTT B MACKENZIE**

Mailing Address 2776 S ARLINGTON MILL DRIVE  
#806

City	State	Zip Code
ARLINGTON	VA	22206

Transaction ID : SB26.78811

Purpose of Disbursement	LOAN REPAYMENT
-------------------------	----------------

009

Amount of Each Disbursement this Period

Candidate Name

## THE CONSERVATIVE STRIKEFORCE

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name	Age	Gender	Religion	Ethnicity	Marital Status	Education Level	Occupation	Income	Voting History	Party Affiliation
John Doe	35	Male	Christian	White	Married	Bachelor's Degree	Software Engineer	\$75,000	Consistent Voter	Republican
Jane Smith	42	Female	Catholic	Hispanic	Single	High School Graduate	Nurse	\$60,000	Frequent Voter	Democrat
Michael Johnson	28	Male	Muslim	African American	Divorced	Master's Degree	Teacher	\$55,000	Occasional Voter	Independent
Sarah Lee	50	Female	Buddhist	Asian	Married	PhD	Academic	\$90,000	Active Voter	Democrat
David Brown	30	Male	Protestant	White	Single	Associate Degree	Construction Worker	\$45,000	Regular Voter	Republican
Emily White	25	Female	Hindu	Indian	Single	Bachelor's Degree	Data Analyst	\$70,000	New Voter	Democrat
Robert Green	45	Male	Jewish	White	Married	Lawyer	Attorney	\$120,000	Consistent Voter	Republican
Lisa Black	38	Female	Sikh	Pakistani	Married	Master's Degree	Marketing Manager	\$85,000	Frequent Voter	Democrat
James Wilson	55	Male	Anglican	White	Widowed	Retired	Retiree	\$40,000	Regular Voter	Republican
Aisha Khan	32	Female	Muslim	Pakistani	Single	Bachelor's Degree	Business Development	\$65,000	Occasional Voter	Independent
Christopher Davis	40	Male	Catholic	White	Married	High School Graduate	Warehouse Worker	\$35,000	Regular Voter	Democrat
Olivia Garcia	27	Female	Buddhist	Latino	Single	Master's Degree	Research Scientist	\$95,000	Active Voter	Democrat
Benjamin Taylor	52	Male	Protestant	White	Married	PhD	Professor	\$110,000	Consistent Voter	Republican
Maya Patel	33	Female	Hindu	Indian	Married	Bachelor's Degree	Software Developer	\$78,000	Frequent Voter	Democrat
Daniel Kim	48	Male	Buddhist	Korean	Single	Associate Degree	Factory Worker	\$42,000	Regular Voter	Democrat
Sophia Rodriguez	29	Female	Catholic	Hispanic	Single	Master's Degree	Journalist	\$68,000	New Voter	Democrat
Matthew Evans	58	Male	Anglican	White	Widowed	Retired	Retiree	\$38,000	Regular Voter	Republican
Zoe Chen	36	Female	Buddhist	Chinese	Married	Bachelor's Degree	Product Manager	\$82,000	Frequent Voter	Democrat
William Miller	43	Male	Protestant	White	Married	High School Graduate	Truck Driver	\$32,000	Regular Voter	Democrat
Ava Nguyen	26	Female	Buddhist	Vietnamese	Single	Master's Degree	Biotech Researcher	\$92,000	Active Voter	Democrat
Lucas Anderson	51	Male	Catholic	White	Married	PhD	University Professor	\$105,000	Consistent Voter	Republican
Isla Martinez	31	Female	Hindu	Spanish	Single	Bachelor's Degree	UX Designer	\$72,000	Frequent Voter	Democrat
Noah Thompson	46	Male	Protestant	White	Married	Associate Degree	Police Officer	\$50,000	Regular Voter	Democrat
Grace Kim	24	Female	Buddhist	Korean	Single	Master's Degree	AI Researcher	\$88,000	New Voter	Democrat
Henry Clark	54	Male	Anglican	White	Widowed	Retired	Retiree	\$36,000	Regular Voter	Republican
Levi Walker	39	Male	Catholic	Hispanic	Married	Bachelor's Degree	IT Support	\$58,000	Frequent Voter	Democrat
Chloe Hall	28	Female	Buddhist	Japanese	Single	Master's Degree	Environmental Scientist	\$76,000	Active Voter	Democrat
Isaac Young	41	Male	Protestant	White	Married	High School Graduate	Delivery Driver	\$30,000	Regular Voter	Democrat
Victoria Lopez	34	Female	Hindu	Indian	Married	Bachelor's Degree	Finance Analyst	\$62,000	Frequent Voter	Democrat
Samuel King	56	Male	Anglican	White	Widowed	Retired	Retiree	\$34,000	Regular Voter	Republican
Madison Scott	29	Female	Buddhist	Chinese	Single	Master's Degree	Genetic Engineer	\$98,000	Active Voter	Democrat
Julian Adams	44	Male	Catholic	Hispanic	Married	Associate Degree	Security Guard	\$28,000	Regular Voter	Democrat
Skylar Baker	27	Female	Buddhist	Vietnamese	Single	Bachelor's Degree	Public Health Specialist	\$74,000	New Voter	Democrat
Leo Hernandez	53	Male	Protestant	White	Married	PhD	Historical Researcher	\$102,000	Consistent Voter	Republican
Penelope Green	37	Female	Hindu	Indian	Single	Master's Degree	Operations Manager	\$80,000	Frequent Voter	Democrat
Grayson Wright	47	Male	Anglican	White	Married	High School Graduate	Janitor	\$25,000	Regular Voter	Democrat
Quinn Hill	25	Female	Buddhist	Korean	Single	Master's Degree	Robotics Engineer	\$94,000	Active Voter	Democrat
Ryan Flores	49	Male	Catholic	Hispanic	Married	Associate Degree	Warehouse Associate	\$31,000	Regular Voter	Democrat
Alma Carter	30	Female	Hindu	Indian	Married	Bachelor's Degree	Project Coordinator	\$67,000	Frequent Voter	Democrat
Maxwell Reed	57	Male	Anglican	White	Widowed	Retired	Retiree	\$33,000	Regular Voter	Republican
Valentina Perez	26	Female	Buddhist	Vietnamese	Single	Master's Degree	Ne			

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

700.00

700.00

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 126 OF 145

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.78810

**THE CONSERVATIVE STRIKEFORCE****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
SCOTT B MACKENZIE

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 2776 S ARLINGTON MILL DRIVE  
#806

City ARLINGTON

State VA

ZIP Code 22206

Original Amount of Loan

700.00

Cumulative Payment To Date

700.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

MM / DD / YY  
02 / 24 / 2014

Date Due

MM / DD / YY

UPON DEMAND

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 127 OF 145

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**BASE CONNECT INC**Nature of Debt (Purpose):  
DIRECT MAIL - CREATIVEMailing Address 1155 - 15TH STREET, NW  
SUITE 410City State Zip Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

48346.24

Transaction ID : SD10.4244

Amount Incurred This Period

17762.27

Payment This Period

10834.91

Outstanding Balance at Close of This Period

55273.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAPITOL CAGING CORP**Nature of Debt (Purpose):  
CAGING SERVICES

Mailing Address 504 SHAW RD

City State Zip Code  
STERLING VA 20166

Outstanding Balance Beginning This Period

2725.06

Transaction ID : SD10.26330

Amount Incurred This Period

11268.42

Payment This Period

12725.06

Outstanding Balance at Close of This Period

1268.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CENTURY DATA SYSTEMS CORP**Nature of Debt (Purpose):  
DATA PROCESSINGMailing Address 1155 - 15TH STREET, NW  
SUITE 410City State Zip Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

17717.77

Transaction ID : SD10.4245

Amount Incurred This Period

0.00

Payment This Period

3426.05

Outstanding Balance at Close of This Period

14291.72

1) **SUBTOTALS** This Period This Page (optional)..... ►

70833.74

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

0.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 128 OF 145

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CONSOLIDATED MAILING SERVICES**

Nature of Debt (Purpose):

DIRECT MAIL - PRINTING &amp; MAILSHOP

Mailing Address 504 SHAW ROAD  
SUITE 206

City State

Zip Code

STERLING

VA

20166

Outstanding Balance Beginning This Period

72312.41

Transaction ID : SD10.4247

Amount Incurred This Period

23763.10

Payment This Period

16499.11

Outstanding Balance at Close of This Period

79576.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**DONOR BUREAU**

Nature of Debt (Purpose):

LIST ENHANCEMENT

Mailing Address 1900 N CULPEPPER ST

City State

Zip Code

ARLINGTON

VA

22207

Outstanding Balance Beginning This Period

5718.36

Transaction ID : SD10.26386

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5718.36

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**INTEGRAM**

Nature of Debt (Purpose):

DIRECT MAIL - PRINTING &amp; MAILSHOP

Mailing Address 8421 HILLTOP ROAD

City

State

Zip Code

FAIRFAX

VA

22031

Outstanding Balance Beginning This Period

18802.32

Transaction ID : SD10.4248

Amount Incurred This Period

13309.26

Payment This Period

17220.46

Outstanding Balance at Close of This Period

14891.12

1) **SUBTOTALS** This Period This Page (optional)..... ►

100185.88

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

0.00



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 129 OF 145

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**THE CONSERVATIVE STRIKEFORCE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**LEGACY LIST MANAGEMENT INC**Nature of Debt (Purpose):  
LIST RENTALSMailing Address 1155 - 15TH STREET, NW  
SUITE 410City State Zip Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

13229.50

Transaction ID : SD10.4249

Amount Incurred This Period

5333.90

Payment This Period

500.00

Outstanding Balance at Close of This Period

18063.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**RHA MARKETING LLC**Nature of Debt (Purpose):  
DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 1124 RUTLANDVIEW DR

City State Zip Code  
DAVIDSONVILLE MD 21035

Outstanding Balance Beginning This Period

4084.15

Transaction ID : SD10.26401

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4084.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

22147.55

2) **TOTALS** This Period (last page this line number only)..... ►

193167.17

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

193167.17

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 130 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00457291	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 02 / 2014	
Mailing Address 44084 RIVERSIDE PKWY SUITE 350		Amount 413.26	
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : SE.68480
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEEKS		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 02 / 2014
Name of Federal Candidate MARK BEGICH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 02 / 2014	
Mailing Address 44084 RIVERSIDE PKWY SUITE 350		Amount 1699.52	
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : SE.68481
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEEKS		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 02 / 2014
Name of Federal Candidate MARK L PRYOR		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
SCOTT B MACKENZIE		[Electronically Filed]	
Signature		Date MM / DD / YYYY 04 / 14 / 2014	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 131 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00457291</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>				
Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 02 / 2014</div>	
Mailing Address 44084 RIVERSIDE PKWY SUITE 350			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3045.03</div>	
City LANSDOWNE		State VA	Zip Code 20176	
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEEKS		Category/ Type	Transaction ID : <b>SE.68482</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 02 / 2014</div>	
Name of Federal Candidate MARK E UDALL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 02 / 2014</div>	
Mailing Address 44084 RIVERSIDE PKWY SUITE 350			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2653.73</div>	
City LANSDOWNE		State VA	Zip Code 20176	
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEEKS		Category/ Type	Transaction ID : <b>SE.68483</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 02 / 2014</div>	
Name of Federal Candidate MARY L LANDRIEU		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  <div style="display: flex; justify-content: space-between;"><div style="width: 40%;">Signature  <div style="border-top: 1px solid black; width: 100%;"></div> <i>SCOTT B MACKENZIE</i></div><div style="width: 20%; text-align: center;">[Electronically Filed]</div><div style="width: 20%; text-align: center;">Date</div><div style="width: 20%; text-align: center;"><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 14 / 2014</div></div></div>				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 132 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00457291</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>			
Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 04 / 02 / 2014	
Mailing Address 44084 RIVERSIDE PKWY SUITE 350		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 3128.76	
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : <b>SE.68484</b>
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEEKS		Category/ Type <div style="border-bottom: 1px solid black; width: 40px;"></div> 004	Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 04 / 02 / 2014
Name of Federal Candidate AL FRANKEN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: MN
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 04 / 02 / 2014	
Mailing Address 44084 RIVERSIDE PKWY SUITE 350		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 597.75	
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : <b>SE.68485</b>
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEEKS		Category/ Type <div style="border-bottom: 1px solid black; width: 40px;"></div> 004	Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 04 / 02 / 2014
Name of Federal Candidate JOHN E WALSH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: MT
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 0.00	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  SCOTT B MACKENZIE		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 04 / 14 / 2014	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 133 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00457291	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>	
Mailing Address 44084 RIVERSIDE PKWY SUITE 350		Amount <b>795.05</b>	
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : <b>SE.68486</b>
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEEKS		Category/ Type <b>004</b>	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>
Name of Federal Candidate JEANNE SHAHEEN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought		<b>0.00</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>	
Mailing Address 44084 RIVERSIDE PKWY SUITE 350		Amount <b>5713.50</b>	
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : <b>SE.68487</b>
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEEKS		Category/ Type <b>004</b>	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		<b>0.00</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		<b>0.00</b>	
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <b>SCOTT B MACKENZIE</b>		Date M M M / D D D / Y Y Y Y Y Y <b>04 / 14 / 2014</b> [Electronically Filed]	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 134 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00457291	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span>			
Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span> 04 / 02 / 2014	
Mailing Address 44084 RIVERSIDE PKWY SUITE 350		Amount <span style="border:1px solid black; padding:2px;">2321.27</span>	
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : <b>SE.68488</b>
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEEKS		Category/ Type <span style="border:1px solid black; padding:2px;">004</span>	Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span> 04 / 02 / 2014
Name of Federal Candidate JEFFREY A MERKLEY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OR</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">0.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span> 04 / 02 / 2014	
Mailing Address 44084 RIVERSIDE PKWY SUITE 350		Amount <span style="border:1px solid black; padding:2px;">4832.13</span>	
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : <b>SE.68489</b>
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEEKS		Category/ Type <span style="border:1px solid black; padding:2px;">004</span>	Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span> 04 / 02 / 2014
Name of Federal Candidate MARK J WARNER		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>VA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">0.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<span style="border:1px solid black; padding:2px;">0.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶		<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures..... ▶		<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  SCOTT B MACKENZIE		Date <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span> 04 / 14 / 2014	
		[Electronically Filed]	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 135 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00457291
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>AMERICAN LIBERTY GROUP LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 02 / 2014	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 367.34	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.68524
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 02 / 2014
Name of Federal Candidate MARK BEGICH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>AMERICAN LIBERTY GROUP LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 02 / 2014	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 1510.69	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.68525
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 02 / 2014
Name of Federal Candidate MARK L PRYOR		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
04 / 14 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 136 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00457291	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee <b>AMERICAN LIBERTY GROUP LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 2706.69	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : <b>SE.68526</b>
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type <b>004</b>	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>
Name of Federal Candidate MARK E UDALL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>AMERICAN LIBERTY GROUP LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 2358.87	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : <b>SE.68527</b>
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type <b>004</b>	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>
Name of Federal Candidate MARY L LANDRIEU		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  SCOTT B MACKENZIE		Date M M M / D D D / Y Y Y Y Y Y <b>04 / 14 / 2014</b> [Electronically Filed]	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 137 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00457291	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee <b>AMERICAN LIBERTY GROUP LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 2781.12	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : <b>SE.68528</b>
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type <b>004</b>	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>
Name of Federal Candidate AL FRANKEN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>AMERICAN LIBERTY GROUP LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 531.33	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : <b>SE.68529</b>
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type <b>004</b>	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 02 / 2014</b>
Name of Federal Candidate JOHN E WALSH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MT</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
SCOTT B MACKENZIE		[Electronically Filed]	
Signature		Date M M M / D D D / Y Y Y Y Y Y <b>04 / 14 / 2014</b>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 138 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00457291	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee <b>AMERICAN LIBERTY GROUP LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 02 / 2014	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 706.72	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.68530
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 02 / 2014
Name of Federal Candidate JEANNE SHAHEEN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>AMERICAN LIBERTY GROUP LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 02 / 2014	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 5078.66	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.68531
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 02 / 2014
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
SCOTT B MACKENZIE		[Electronically Filed]	
Signature		Date MM / DD / YYYY 04 / 14 / 2014	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 139 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00457291</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee <b>AMERICAN LIBERTY GROUP LLC</b> <b>[MEMO ITEM]</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 02 / 2014</div>		
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2063.35</div>		
City WASHINGTON		State DC	Zip Code 20003		<b>Transaction ID : SE.68532</b>
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 02 / 2014</div>		
Name of Federal Candidate JEFFREY A MERKLEY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OR		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>AMERICAN LIBERTY GROUP LLC</b> <b>[MEMO ITEM]</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 02 / 2014</div>		
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4295.23</div>		
City WASHINGTON		State DC	Zip Code 20003		<b>Transaction ID : SE.68533</b>
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 02 / 2014</div>		
Name of Federal Candidate MARK J WARNER		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  SCOTT B MACKENZIE		[Electronically Filed]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 14 / 2014</div>	

Full Name of Payee <b>CLIENT FIRST CONSULTING GROUP LLC</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 02 / 2014</div> </div>	
Mailing Address 385 AVERY LN		Amount <div> <div></div> <div>1416.27</div> </div>	
City MEDINA	State OH	Zip Code 44256	Transaction ID : <b>SE.68504</b> Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>04 / 02 / 2014</div> </div>
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type <div> <div></div> <div>004</div> </div>	
Name of Federal Candidate MARK L PRYOR		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought <div> <div></div> <div>0.00</div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(c) TOTAL Independent Expenditures.....	▶	

Full Name of Payee <b>CLIENT FIRST CONSULTING GROUP LLC</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 02 / 2014</div> </div>	
Mailing Address 385 AVERY LN		Amount <div> <div>2211.44</div> </div>	
City MEDINA	State OH	Zip Code 44256	Transaction ID : <b>SE.68506</b> Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>04 / 02 / 2014</div> </div>
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type <div> <div>004</div> </div>	
Name of Federal Candidate MARY L LANDRIEU		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought <div> <div>0.00</div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 142 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00457291	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee <b>CLIENT FIRST CONSULTING GROUP LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 02 / 2014	
Mailing Address 385 AVERY LN		Amount 2607.30	
City MEDINA	State OH	Zip Code 44256	Transaction ID : SE.68507
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 02 / 2014
Name of Federal Candidate AL FRANKEN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>CLIENT FIRST CONSULTING GROUP LLC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 02 / 2014	
Mailing Address 385 AVERY LN		Amount 498.12	
City MEDINA	State OH	Zip Code 44256	Transaction ID : SE.68508
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 02 / 2014
Name of Federal Candidate JOHN E WALSH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
SCOTT B MACKENZIE		[Electronically Filed]	
Signature		Date MM / DD / YYYY 04 / 14 / 2014	

Full Name of Payee <b>CLIENT FIRST CONSULTING GROUP LLC</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 02 / 2014</div> </div>	
Mailing Address 385 AVERY LN		Amount <div> <div>4761.25</div> </div>	
City MEDINA	State OH	Zip Code 44256	Transaction ID : <b>SE.68510</b> Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>04 / 02 / 2014</div> </div>
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEEKS		Category/ Type <div> <div>004</div> </div>	
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <div> <div>0.00</div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

Three digital display units are shown, each with a two-line display. The top line of each unit shows the month (M), day (D), and year (Y) indicators. The bottom line shows the numerical value. The first unit shows '04', the second shows '14', and the third shows '2014'.





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 145 OF 145  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00457291	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee <b>STRATEGIC CAMPAIGN GROUP INC</b> [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>03 / 10 / 2014</b>	
Mailing Address 4600 N FAIRFAX DRIVE SUITE 802		Amount 4375.00	
City ARLINGTON	State VA	Zip Code 22203	Transaction ID : <b>SE.64373</b>
Purpose of Expenditure GOTV ROBO CALLS		Category/ Type <b>004</b>	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>03 / 10 / 2014</b>
Name of Federal Candidate DAVID JOLLY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>13</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>	
Full Name of Payee		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/ Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶			
(c) TOTAL Independent Expenditures..... ▶		0.00	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  SCOTT B MACKENZIE		Date M M M / D D D / Y Y Y Y Y Y <b>04 / 14 / 2014</b>	
		[Electronically Filed]	